

## **DEFENSE COUNTERINTELLIGENCE AND SECURITY AGENCY**

27130 TELEGRAPH ROAD QUANTICO, VA 22134-2253

November 6, 2019

MuckRock Dept MR 38669 411A Highland Ave. Somerville, MA 02144-2516

Control Number: DCSA-Q 020-063

Dear Ms. Best,

This is in response to your Freedom of Information and Privacy Act request referred to Defense Counterintelligence and Security Agency (DCSA) from the Federal Bureau of Investigation (FBI). The referral (FOIA/PA Control Number 1377753-000) was received in our office November 6, 2019.

Enclosed are documents responsive to your request. In an effort to provide you with the greatest degree of access authorized by law, we have considered this material under the Freedom of Information Act (FOIA), Title 5 U.S.C. § 552 and Privacy Act of 1974, Title 5 U.S.C. § 552a.

Our office reviewed the enclosed documents in which all documents are being released to you with redactions. DCSA withheld information in accordance with FOIA exemptions (b)(6), and (b)(7)(C). Exemptions (b)(6) and (b)(7)(C) are used to protect information that could reasonably be expected to cause an unwarranted invasion of privacy.

You have the right to appeal this response by submitting a written request to the Defense Counterintelligence and Security Agency; ATTN: Office of General Counsel; 27130 Telegraph Road; Quantico, VA 22134. Clearly mark the outside of the envelope and your written appeal letter "Privacy/FOIA Appeal". Your appeal must be received by DCSA within ninety (90) calendar days from the date of this letter to be considered timely. Your written appeal should include the reasons why the requested information should be released and why this action may be in error. Include with your appeal a copy of your original request and this response letter.

Please contact the FBI for information regarding redactions made and denoted by them.

The Office of Government Information Services (OGIS) was created to offer mediation services to resolve disputes between FOIA requesters and federal agencies as a non-exclusive alternative to litigation. You may contact OGIS in any of the following ways:

U.S. National Archives and Records Administration
Office of Government Information Services
8601 Adelphi Road – OGIS
College Park, MD 20740-6001

If you have any questions, please feel free to contact me at (571) 305-6740 or email dcsa.quantico.dcsa-hq.mbx.foia@mail.mil. Please reference control number DCSA-Q 020-063

Sincerely,

hief DCSA Freedom of Information and

Telephone: (202) 741-5770

Toll-Free: 1-877-684-6448

Fax: 202-741-5769

Email: ogis@nara.gov

Privacy Office, Headquarters

Enclosures: As stated

DCSA (OPM) Direct

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U.S. CIVIL SERVICE COMMIS (F.P.M. CHAPTER 736) 84-107	FOR	SENSITIVE POSITI				
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is punishable by law.		MAY 1988	(SIGNATURE—Sign original a	ind first carbon copy)
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Austria, Switzerland Italy, France May 1987 June 1987 Official Travel to include participation in Vienna UN Drug Conference.  ARE YOU NOW, OR HAVE YOU EVER BEEN, A MEMBER OF THE COMMUNIST PARTY, U.S.A. OR ANY COMMUNIST OR FASCIST ORGANIZATION?   YES   N  ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF THE COMMUNIST PARTY, U.S.A. OR ANY COMMUNIST OR FASCIST ORGANIZATION?   YES   N  ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF ANY FOREIGN OR DOMESTIC ORGANIZATION, ASSOCIATION, MOVEMENT, GROUP, OR COMBINATION PERSONS WHICH IS TOTAL ITARIAN, FASCIST, COMMUNIST, OR SUBVESSIVE OR WHICH HAS ADOPTED OR SHOWS, A POLICY OF ADVOCATING OR APPROVING TO ALTON FRENCH SHOW IN THE UNITED STATES OF UNCONSTITUTIONAL MELANS   YES   NO.  IF YOUR ANSWER TO QUESTION 21 OR 22 ABOVE IS "YES." STATE THE NAMES OF ALL SUCH ORGANIZATIONS MOVEMENTS. GROUPS, OR CO SHIPMATIONS OF PROSONS AND DATES OF MEMBERSHIP. IN TITM 22 OR ON A SEPRATE SHEET TO BE ALTICULED TO AND MADE A PART OF THIS FORM, GIVE CO PLETE DETAILS OF YOUR ACTIVITIES THERRIN AND MAKE ANY EXPLANATION YOU DESIGN REGARDING YOUR MEMBERSHIP OR ACTIVITIES.  NAME IN FULL  ADDRESS  FROM  TO OFFICE HELD  MEMBERSHIP IN OTHER ORGANIZATIONS, (List all organizations in which you are now a member or have been a member, except those which she religious or political affiliations.) (If none, so state.)  NAME IN FULL  ADDRESS  FROM  TO OFFICE HELD  RELATIVES. (Parenta, apouse, divorced spouse; children, both both and sisters, living or dead. Name of spouse should include maiden name as any other, names by previous marriage. If person is dead, state "dead" after relationship; and furnish information for other columns as of time deads.	<i>p</i> .v	OUS BREAKDOWN OR HAVE YOU EVER HAD give details in item 28.)	MEDICAL TREATMEN	T FOR A MENTAL CON	DITION? YES NO.	
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Standard Form 86
AUGUST 1964
U.S. CIVIL SERVICE COMMISSION
(F.P.M. CHAPTER 796)

### SECURITY INVESTIGATION DATA FOR SENSITIVE POSITION

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O. EDUCATION. (All	schools above elementary.)			<del>_</del>			
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26a. REFERENCES. (Name	three persons, not relatives or employers	s, who are aware of	your qualifications and	fitness.)	
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60. CLOSE PERSONAL ASSO	CIATES. (Name three persons, such as fr	inds, VcAoomarateC			20
NAME IN	FULL HOME ADDRESS	THE RESERVE AND ADDRESS OF THE PARTY OF THE	BUSINESS ADDRESS	YEARS KNOW	N
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TO YOUR KNOWLEDGE	. HAVE YOU EVER BEEN THE SUBJECT OF	A FULL FIELD OR	BACKGROUND PERSONAL	INVESTIGATION BY ANY	AGENCY OF THE
date of investigation.	TYPES NO. (If your answer is "Ye and (3) the level of security clearance gra	nted, if known.)	s, (1) the name of the in	nvestigating agency (2) th	e approximate
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Before signing this	s form check back over it to make so	tre you have onen	الم المالية المالية المالية المالية	n.: 2 '4 :12.7	
	CE	ERTIFICATION	creu an questions fu	lly and correctly.	
I CERTIFY that th	e statements made by me on this	form are true, co	mplete, and correct	to the best of my kno	wledge and
mer, and are made in	good faith.			•	
False statement on this is punishable by law			CHATTIES CONTRACTOR		·
	(DATE)			and first carbon copy)	
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on when this form is	AGENCY: See Federal Personnel M	lanual Chapter 736	and FPM Supplemen	296-31, Appendix A,	for details
	required and how it is used. If this population about the carbon copy should be cigned				
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Andruet totals of oth	erwise, to the United States Civil Serv	VICE Commission	Intern of Passonnal I	matical and and two	DC V
	quest for full field security investigation a request for preappointment national				
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1	TITLE OF AUTHORIZED AGENCY OFFICIAL)		· 3		1

14. HAVE YOU EVER BEEN DI (If answer is "Yes," gi	SCHARGED FROM THE ARMED FORCES UNDER ve details in item 28.)	OTHER THAN HONORABLE CONDITIO	NS? YES NO.	
5. EMPLOYMENT. (List AL and addresses when ur	L employment dates starting with your p nemployed. Give name under which emp	resent employment. Give both n loyed if different from name now	nonth and year for all	dates. Show ALL dates
FROM TO	NAME OF EMPLOYER (Firm or agency) AND SUPERVISOR (Full name, if known)	ADDRESS (Where employed)	TYPE OF WORK	REASON FOR LEAVING
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(If your answer to 16 or	D (QUIT) AFTER BEING INFORMED THAT YOUR  17 above is "Yes" give details in item 28.  nation should agree with the statements m	Show the name and address of	employer, approxima	REASON? YES NO. te date, and reasons in
ou may omit: (1) Trafficion to must be include IF YOUR ANSWER IS "YES DATE CHARGE 1983 (?) spe	RESTED. TAKEN INTO CUSTODY HELD FOR INVOICE violations for which you paid a fine of \$30 d, even though they were dismissed or you. "GIVE FULL DETAILS BELOW:  PLACE  Reding Arlington, V.	O or less; and (2) anything that has morely forfeited collateral.)  LAW ENFORMATION AUTHO ?	res   no.  cement rity  fine by	ACTION TAKEN 7 mail of
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F YOUR ANSWER TO QUEST! INATIONS OF PERSONS AND LETE DETAILS OF YOUR ACT	ON 21 OR 22 ABOVE IS "Y DATES OF MEMBERSHIP.	ES," STATE THE NAMES IN ITEM 28 OR ON A SI	OF ALL SUCH OF	GANIZATIONS.	ASSOCIATIONS TO AND MADE	MOVEMENTS, GR	OUPS, OR COM-
LETE DETAILS OF YOUR ACT NAME IN FULL	•		YOU DESIRE REC	ARDING YOUR			
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#### THE WHITE HOUSE

WASHINGTON
May 19, 1988

MEMORANDUM FOR F.B.I

FROM:

BUBJECT: HUGH MONTGOMERY

The following information was received telephonically yesterday from Ambassador Montgomery's office, as an addendum to his SF-86:

#25 - Relatives	DOB	POB
Father, (b) (6), (b) (7)(C) Mother (b) (6), (b) (7)(C)		Windsor Locks, Ct. Springfield, Mass.
Brother, (b) (6), (b) (7)(C)		Springfield, Mass.
Son (b) (6), (b) (7)(C)  Daughter (b) (6), (b) (7)(C)	*They go strict	Berlin, Germany Berlin, Germany
#26, a	They go strict	ly by
(b) (6), (b) (7)(C) (b) (6), (b) (7)(C)		

#26, b

Ambassador Montgomery has stated on his SF-86, and his secretary has reiterated to me also, that the Ambassador's close personal friends are all with the CIA and their names cannot be divulged.

has recently died, but his widow can serve in this capacity, at the same telephone no.

Thank you.

b6 Per FBI

b7C

# SUPPLEMENT TO SF-86 (Attach additional pages if necessary)

1. Please furnish the names and addresses of all corporations, firms or other business enterprises, partnerships, nonprofit organizations, and educational or other institutions with which you are presently associated or have been associated during the past five years either as officer, director, trustee, sole owner, partner or stockholder with controlling interest.

None.

2. Have you ever been a candidate for Federal, state or local elected office, or a treasurer or other officer of a political committee? Were there any complaints lodged with the Federal Election Commission or state or local election authorities against you or your political committee? If so please explain.

No.

3. Do you maintain any residence other than your permanent residence; e.g., vacation home? If so, please furnish address.

No.

4. Have you ever been disciplined or cited for a breach of ethics or unprofessional conduct by, or been the subject of a complaint to, any court, administrative agency, professional association, disciplinary committee, or other professional group? If so, please give full details.

No.

(over)

5. To your knowledge have your activities or those of any of your business enterprises, or associates in those enterprises, ever been the subject of criminal investigation, or a civil enforcement investigation or proceeding? If so, please give full details.

No.

6. Have you ever been a party in any civil court action? If so, please give full details.

No.

I understand that the information being provided on this supplement to the SF-86 is to be considered part of the original SF-86 dated9 May 1988 and a false statement on this form is punishable by law.

Signed June De

•				BOB appr	oval No. 50-821
Standard Form 86 August 1986 U.S. CIVIL SERVICE COMMISS F.P.M. CHAPTER 736)	SECURIT	Y INVESTIGATION DATA SENSITIVE POSITION	CA	SE SERIAL NO. (CSC u	ee only)
INSTRUCTIONS.—P	repare in triplicate, using a typew item, continue under item 28.	writer. Fill in all items. If the a	nswer is "No" or "	None," so state. If	more space
I. FULL NAME (Initials and abridgements of	Montgomery 2	Hugh (MIDDI	IN)	11-29-23	3
full name are not acceptable. If no middle name, show "(NMN)"; if initials only, show "(no given or middle name)"	OTHER NAMES USED. (Maiden name legally or otherwise, aliases, alicki	e, names by former marriages, former names, etc. Specify which, and show	4.0	PLACE OF BIRTH  PING TIELD  MALE FEMALE  HEIGHT WEIGHT CO	MA COLOR HAIR
SINGLE MARRIED WIDOW(ER) DIVORCED	7. IF MARRIED, WIDOWED, OR DIVOR WIFE'S MAIDEN NAME. GIVE DATE (Give same information regards)	CED. GIVE FULL NAME AND DATE AND PI AND PLACE OF MARRIAGE OR DIVORCE. Ing all provious marriages and divorce	ACE OF BIRTH OF SP	DUSE OR FORMER SPO	USE. INCLUDE
DATES AND PLACES	OF RESIDENCE. (If actual places of anuary 1. 1937. Continue under ite	residence differ from the mailing ad m 18 on other side if necessary.)	dresses, furnish and	identify both Begin	with presen
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).	BY BIRTH   NATURALIZE	D ALIEN REGISTRATION NO.	DATE, PLACE, AND	COURT	
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ALIEN	REGISTRATION NO.	NATIVE COUNTRY	DATE AND PORT	OF ENTRY	
0. EDUCATION. (A)1 NAME OF S	schools above elementary.)  CHOOL ADDRESS	FROM (Year)	TO (Year)	DEGREES	\$
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1. THIS SPACE FOR FE	BI USE. (See also item 29.)	12. SOCIAL SECURITY NUMBER	(b) (6), (b) (7)(C)		
		13. MILITARY SERVICE (Past or p  SERIAL NO.  (If none, give grade or rating at separation)	BRANCH OF SERV (Army, Navy, Air Fo	FROM (Yr.)	10 (Yr.)

DCSA (OPM) Direct
FOIA # 1377753-00, 161-140-20819, sect. 1, serial 1, FDPS pgs. 42-43

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CASE SERIAL NO. (CSC .... -----

19. HAVE YOU EVER HAD A NER (If your enemer is "Yee,"	VOUS BREAKDOWN OR HA Live details in item 28.)	VE YOU EVER HAD MED	ICAL TREATMENT FOR A M	ENTAL CONDITION?	YES X HO.	
A COLLEGE MAINTENANCE						
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assignments	countries i		on with oill	clai U.S.	governme	nt
21. ARE YOU NOW, OR HAVE YO	U EVER BEEN, A MEMBER	OF THE COMMUNIST PA	RTY, U.S.A., OR ANY COM	MUNIST OR FASCIST	ORGANIZATION?	YES XXNO.
22. ARE YOU NOW OR HAVE YOU PERSONS WHICH IS TOTALITY COMMISSION OF ACTS OF FO	U EVER BEEN A MEMBER O ARIAN, FASCIST, COMMUN	F ANY FOREIGN OR DOI	MESTIC ORGANIZATION, AS	SOCIATION, MOVEME	NT, GROUP, OR CO	MBINATION OF
TO ALTER THE FORM OF GO	DRCE OR VIOLENCE TO DEI VERNMENT OF THE UNITE	NY OTHER PERSONS THE D STATES BY UNCONSTI	EIR RIGHTS UNDER THE CO	NSTITUTION OF THE	UNITED STATES, C	R WHICH SEEKS
23. IF YOUR ANSWER TO QUEST BINATIONS OF PERSONS AND PLETE DETAILS OF YOUR AC	TON 21 OR 22 ABOVE IS "YI D DATES OF MEMBERSHIP. TIVITIES THEREIN AND MA	ES," STATE THE NAMES IN ITEM 28 OR ON A SE IKE ANY EXPLANATION	OF ALL SUCH ORGANIZATE PARATE SHEET TO BE ATT. YOU DESIRE REGARDING	IONS, ASSOCIATIONS, ACHED TO AND MADE	MOVEMENTS. GR	OUPS, OR COM-
NAME IN FULL	ADDRES		FROM	TO	OFFICE HELD	
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24. MEMBERSHIP IN OTHER ORG	SANIZATIONS. (List all or ations.) (If none, so etc	tanisations in which ;	you are now a member	or have been a men	ber, except thos	e which show
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25 DCI ATIUTE 40						
25. RELATIVES. (Parente, spot any other names by previo of death.)	ise, divorced spouse, chil ous marriage. If person	idren, brothers, and s i is dead, state ''dead'	isters, living or dead.	ame of spouse show furnish information	ild include maid I for other colum	ien name and nas as of time
RELATION	NAME IN FULL	YEAR OF BIRTH	ADDRESS	COU	NTRY OF	PRESENT CITIZENSHIP
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mother	o) (6), (b) (7)(C)	\$0	eceased)		SA .	
brother	b) (6), (b) (7)(C)			MA	USA	. USA
wife (b) (6), (b) (	7)(C)					
NA son (b) (6), (b) (7)(C)					stria	USA
1100 110	(b) (7)(C)				ermany	USA
(b)		V			ermany	USA
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